2004 FOR PROFIT CORPORATION

Apr 08, 2004 8:00 am Secretary of State ANNUAL REPORT 04-08-2004 90020 005 ***150 00 DOCUMENT # F93000004006 INTERMODAL EXPRESS, INC. OF NAPLES Principal Place of Business Mailing Address 94046997 300 FIFTH AVE. S. C/O ARTHUR P. STEINMETZ 50 PUBLIC SQUARE 1300 TERMINAL TOWER STF 22 NAPLES, FL 34102 US CLEVELAND, OH 44113 2. Principal Place of Business 3. Mailing Address 2500 Tamiami Trail N. Arthur P. Steinmetz Suite, Apt. #, etc. Unit 210 Suite, Apt. #, etc. 1301 E. Ninth St., #3500 01072004 Chq-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For Naples, Florida Cleveland, Ohio 34-1281386 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 44114-1821 34103 USA **USA** Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Johnston, Sidney A. JOHNSTON, PAUL W JR Street Address (P.O. Box Number is Not Acceptable) 1900 Gulf Shore Blvd. North, 300 FIFTH AVE., SOUTH Blv SUITE 22 Club #106 NAPLES, FL 34102 Naples Zip Code 34102 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIDNEY A. JOHNSTON March 15, 2004 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE X Delete TITLE PD K) Change ☐ Addition NAME JOHNSTON, PAUL W NAME Johnston, Sidney A. 300 FIFTH AVE., SO. SUITE 22 STREET ADDRESS STREET ADDRESS 1900 Gulf Shore Blvd North, Blv. Club #106 CITY-ST-ZIP NAPLES, FL CITY-ST-ZIP Naples, Florida Delete K) Change TITLE TITLE ☐ Addition SD STEINMETZ, ARTHUR P NAME MAME Steinmetz, Arthur P. 1301 E. Ninth St., #3500 STREET ADDRESS 1300 TERMINAL TOWER STREET ADDRESS CITY-ST-ZIP CLEVELAND, OH CITY-ST-ZIP <u>Cleveland, OH 44114-1821</u> TITLE Delete TOLE K1 Change ☐ Addition PAUL W. JOHNSTON, JR. NAME NAME Johnston, Sidney A. 1900 Gulf Shore Blvd.North, Blv. Club #106 300 FIFTH AVE. SO., STE 22 STREET ADDRESS STREET ADDRESS NAPLES, FL CiTY-ST-ZIP CITY-ST-7IP Naples, Florida TITLE ☐ Delete TITLE ☐ Change ☐ Addition MITCHELL C. BROWN NAME NAME STREET ADDRESS 1334 ELMWOOD STREET ADDRESS CITY-ST-ZIP WILMETTE, IL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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. Yoknelos SIDNEY A. JOHNSTON March 15, SIGNATURE: <u> 2004 (216) 781-</u>1212 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

changed, or on an attachment with an address, with all other like empowered